U.S. Patient and I recently U.S. Ober Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Mumber
9-6048 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Cotumn 2) SMALL ENTITY NUMBER FILED MAKBER EXTRA RATE FEE RATE BASIC FEE FEE (37 CFR 1.18(a)) OR 101AL CLAMS (37 CFR 1.15(4)) minus 20 = OR INDEPENDENT CLAIMS office 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR "If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Cotumn 1) (Cotumn 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAMS HIGHEST REMAINING NUMBER PREVIOUSLY PRESENT ADDI RATE 19 ENDMENT AFTER EXTRA 105 TIONAL TIONAL AMENDMENT PAID FOR Minus 24 ε (D) CO'R 1.18(Q) x,50. OR x : 200. x :/00 . OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d) ·180. ..360 OR TOTAL TOTAL ADD'L FEE QR ADD'L FEE (Calumn 2) Cotumn 1) (Cotumn 3) CLADAS HIGHEST REMAINING AFTER PRESENT RATE ADDI-TIDNAL RATE ADDI PREVIOUS V FYTRA AMENDMENT PAID FOR ENDME FEE FEE a v Total CI CPR 1.18(c) Minus :<u>50</u> : (D) CFR 1.16(b)) :200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 180-**₹** OR YOTAL ADD'L FEE OR ADD'L FEE (Column 2) (Column 3) CLAIMS HIGHEST ပ REMAINING NUMBER PRESENT RATE ADOI-RATE ADDI-TIONAL AFTER PREVIOUSLY DMENT TIONAL ENDMENT PAID FOR FEE . FEE Total 25 DI CIR LIGHT 50. œ Independent O7 CFR L14DID 鱼 OR ş FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 340 OR TOTAL TOTAL ADD'L FEE ADD'L FEE

* If the entry in column 1.is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or ration a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to tate 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this under, should be sent to the Crief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2